

PTO/SB/81 (09-03)

Approved for use through 11/30/2005. OMB 0851-0035

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INDICATION FORM**

Application Number	10/821,388
Filing Date	April 9, 2004
First Named Inventor	BROWN ELLIOTT, Candice Hellen
Title	IMPROVED SUBPIXEL RENDERING FI
Art Unit	To Be Assigned
Examiner Name	To Be Assigned
Attorney Docket Number	08831.0068

I hereby appoint:



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Practitioner(s) named below:

Name	Registration Number

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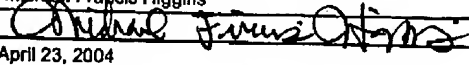
<input type="checkbox"/>	Firm or Individual Name			
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I am the:



Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name	Michael Francis Higgins		
Signature			
Date	April 23, 2004	Telephone	707-824-2480

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.



*Total of 2 forms are submitted.

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Art Unit	To Be Assigned
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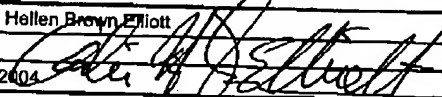
Fax

I am the:



Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name	Candice Hellen Brown Elliott
Signature	
Date	April 23, 2004
Telephone	707-824-2498

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.



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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/821,388	
	Filing Date	April 9, 2004	
	First Named Inventor	BROWN ELLIOTT, Candice Helten	
	Art Unit	To Be Assigned	
	Examiner Name	To Be Assigned	
Total Number of Pages In This Submission	3	Attorney Docket Number	08831.0068

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Remarks 1 TRANSMITTAL FORM 2 SEPARATE POWER OF ATTORNEY		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Stuart P Kaler Reg No. 35,913	
Signature	<i>Stuart P. Kaler</i>	
Date	04/29/04	

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Typed or printed name	Carolyn Marsden	
Signature	<i>[Signature]</i>	Date 04/29/04

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